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CONFIRMATION NO. 9495

Bib Data Sheet

SERIAL NUMBER 10/764,402	FILING DATE 01/23/2004 RULE	CLASS 439	GROUP ART UNIT 2833	ATTORNEY DOCKET NO. 45627/6:1
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APPLICANTS

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** CONTINUING DATA ***** *No nl DNL*** FOREIGN APPLICATIONS ***** *No nl DNL*

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** 04/30/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Dtwn</i>	WA	DRAWING 3	CLAIMS 30	CLAIMS 3
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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TITLE

Electrical connector assembly with reconfigurable strain relief

FILING FEE RECEIVED 475	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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